State of California—Health and Welfare Agency Form Approved CMB No. 2050—0039 (Expires 9-30-91) Please print or type. (Form designed for use on elite (12-pitch typewriter).

## See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division Sacramento, California

|                         | A           | UNIFORM HAZARDOUS 1. Generator's US EPA ID N  |  | anifest<br>iment No.   | 2. Page 1  | Information i                              | in the shaded areas |  |  |
|-------------------------|-------------|---|--|--|--|--|---------------------|--|--|
|                         |             | WASTE MANIFEST   QA   XP   0   0 P 3  | 6 483   100  | I I I  | 01   |  | ed by Federal law.  |  |  |
|                         |             | 3. Generator's Name and Mailing Address Para Plate  |  |  |  | A. State Manifest Document Number 88677028 |                     |  |  |
|                         |             | 15910 Shoemaker Ave., Cerritos, CA 90701  |  |  |  | B. State Generator's ID                    |                     |  |  |
|                         |             | 4. Generator's Phone (213 404-3434  |  |  |  |  |                     |  |  |
| 550                     |             | OMEGA RECOVERI SERVICES CAR DAY 245 001   |  |  | C. State Transporter's ID 0/0386                               |  |                     |  |  |
| 52-7                    |             |   |  |  | D. Transporter's Phone 213/698-0991  E. State Transporter's ID |  |                     |  |  |
| 1-800-852-7550          |             | 7. Transporter 2 Company Name 8.  | US EPA ID Number   | L  | F. Transporter's   |  |                     |  |  |
| 1-8                     |             | 9. Designated Facility Name and Site Address 10. US EPA ID Number   |  |  |  | G. State Facility's ID                     |                     |  |  |
| 1                       |             | Omega Recovery SErvices 12504 E. Whittier Blvd.  CIADIO! 4 2 2 4 5  |  |  |  |  | 45001               |  |  |
| 004                     |             | 12504 E. Whittier Blvd. Whittier, CA 90602   CAD 042 245 001   213/698-0991   |  |  |  |  |                     |  |  |
|                         |             | Whittier, CA 90602   CAD 042 245 001   213/698-0991   12 Containers   13 Total   14   1   |  |  |  |  |                     |  |  |
| 7028<br>LIFORNIA CALL 1 |             | 11. US DOT Description (Including Proper Shipping Name, Hazard Class,   | and ID Number)   |  |  | antity Un                                  | it Waste No.        |  |  |
| 8677<br>WITHIN CAL      |             | a. Waste ORM-A NOS NA 1693 ON   | RM-A   |  |  |  | State<br>211        |  |  |
| ا≩ٍڡ                    | G<br>E      | (Flexosolvent)  |  |  | DM   | G  |                     |  |  |
| $\infty$                | A.I         | b.  |  | 0013   | 1 000  | 40   | State               |  |  |
| 0 1-800-424-8802; W     | R<br>A      | <b>J</b>  |  |  |  |  |                     |  |  |
| 4-8                     | î           |   |  |  | 1 1 1  | 11   | EPA/Other           |  |  |
| 0.42                    | Ř           | C.  |  |  |  |  | State               |  |  |
| 8                       |             | ·   |  |  |  |  | EPA/Other           |  |  |
| æ                       |             | d.  |  |  |  |  | State               |  |  |
| CENTER                  | I           | <u>.</u>  |  |  |  |  |                     |  |  |
|                         |             |   |  | 11   |  | 1 1  | EPA/Other           |  |  |
| NS                      |             | J. Additional Descriptions for Materials Listed Above   |  | •  | K. Handling Co.  | les for Waste                              | s Listed Above      |  |  |
| RESPONSE                |             |   |  |  | ~ o/   |  | <b>4</b>            |  |  |
| 8                       |             |   |  |  | C.   | d.   | 4                   |  |  |
| NA                      |             |   |  |  |  |  |                     |  |  |
| NATIONAL                |             | 15. Special Handling Instructions and Additional Information  |  |  |  |  |                     |  |  |
| 뿐                       |             | ·   |  |  |  |  |                     |  |  |
|                         |             | Profile No. Al5618  |  |  |  |  |                     |  |  |
| CALL                    |             | 16.   |  |  |  |  |                     |  |  |
| SPILL.                  |             | GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and          |  |  |  |  |                     |  |  |
|                         |             | national government regulations. If I am a large quantity generator, I certify that I have a program in pla   | generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined |  |  |  |                     |  |  |
| e<br>B                  |             | to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste |  |  |  |  |                     |  |  |
| S                       |             | generation and select the best waste management method that is av-  | ailable to me and that I c   | an afford  |  |  | Month Day Year      |  |  |
| EMERGENCY               | -           | Printed/Typed Name  | Signature 7MEM   | and a second   |  | •  | ~ 6 250 ×           |  |  |
| - E                     | Ť           | Frank E. Hernandez  17. Transporter 1 Acknowledgement of Receipt of Materials   | 7201122  |  |  | <del></del>                                |                     |  |  |
| AN                      | R<br>A      | Printed-Typed Name  | Signature  | 1111   |  | <u> </u>                                   | Month Day Year      |  |  |
| P.                      | N<br>S      | ROBERT J CIRINGEON  | late   |  | Corre  |  | 055590              |  |  |
|                         | 9 P O P     | 18. Transporter 2 Acknowledgement of Receipt of Materials   | ,  | Street, Street | -  |  |                     |  |  |
| CASE                    | R<br>T<br>E | Printed/Typed Name  | Signature  |  |  |  | Month Day Year      |  |  |
| Z -                     | Ř           | 19. Discrepancy Indication Space  |  |  |  | MANAGEMENT AND THE PARTY OF                |                     |  |  |
|                         | F           | ,   |  |  |  |  |                     |  |  |
| 1                       | A<br>C      |   |  |  |  |  | •                   |  |  |
|                         | L           |   |  |  |  |  |                     |  |  |
|                         | 1           | 20. Facility Owner or Operator Certification of receipt of hazardous mater  | ,  | nifest except  | as noted in Item   | 19   | Month Day Year      |  |  |
|                         | Y           | Printed Typed Name  FRAUK FORD  | Signature  | _ //   |  | Ø -  | 101512151910        |  |  |
| 1                       |             |   |  | 20-27  |  | l .  | 1-1-1-1             |  |  |